

UNITED STATES COURT OF APPEALS FOR THE FIFTH CIRCUIT

ACKNOWLEDGMENT AND DESIGNATION OF ARGUING COUNSEL

Counsel who intend to present oral argument must file this form no later than two weeks prior to court week beginning. Generally, only counsel who are members of the bar of the Court of Appeals for the Fifth Circuit and who have filed an appearance form are permitted to argue before the Court.

Case No. _____,

vs. _____

Date of Oral Argument: _____ Location: _____

ARGUING ATTORNEY'S NAME _____ CELL NUMBER _____

LIST ALL PARTIES YOU REPRESENT _____

(PLEASE SELECT ONE)

APPELLANT

APPELLEE

CROSS-APPELLANT

CROSS-APPELLEE

AMICUS

INTERVENOR

According to this court's rules, a cross or separate appeal will be argued with the initial appeal during the same argument, unless the court directs otherwise. If a case involves a cross appeal, the party who first files a notice of appeal is considered the appellant unless the parties otherwise agree, or the court directs otherwise. If separate appellants support the same argument, they are to avoid duplication of argument.

THE ORDER OF PRESENTATION AND DIVISION OF ORAL ARGUMENT TIME WILL BE AS FOLLOWS:

APPELLANT(s)	NAME	OPENING TIME	REBUTTAL TIME	(FOR APPELLANTS ONLY, THE COURT PREFERS NO MORE THAN 5 MINUTES FOR REBUTTAL)
COUNSEL #1	_____	_____	_____	
COUNSEL #2	_____	_____	_____	
COUNSEL #3	_____	_____	_____	
COUNSEL #4	_____	_____	_____	
APPELLEE(s)	NAME	TIME		
COUNSEL #1	_____	_____		
COUNSEL #2	_____	_____		
COUNSEL #3	_____	_____		
COUNSEL #4	_____	_____		
AMICUS/INTERVENOR(s)	NAME	TIME		
COUNSEL #1	_____	_____		

Filing Instructions:

Print the completed form to PDF (File > Print > PDF Printer/Creator), then, in CM/ECF, choose Event Category - Argument > File an Oral Argument Acknowledgment Form

CERTIFICATE OF SERVICE

I certify that on _____ the foregoing document was served on all parties or their counsel of record through the CM/ECF system if they are registered users or, if they are not, by placing a true and correct copy in the United States mail, postage prepaid, to their address of record.

/s/ _____ Date _____